

**NC DHHS
DMH/DD/SAS
CAP-MR/DD Adult Day Health**

Reviewer:

	Description	Conditional Endorsement					Full Endorsement				
CAP-MR/DD – Adult Day Health		Evidence of Compliance	MET	NOT MET	N/A		Evidence of Compliance	MET	NOT MET	N/A	Comments
	Provider Requirements										
a	<i>**1) Must be delivered by practitioners employed by an organization that meets the standards established by the Division of MHDDSAS. These standards set for the administrative, financial, clinical, quality improvement, and information services infrastructure necessary to provide services.</i>	Provider application with all required supporting documentation as required in;					Provider application with all required supporting documentation as required in;				
b	2) Provider organization must demonstrate they meet these standards by being endorsed by the LME.	provider application; program description Policy and					provider application; program description Policy and				
c	<i>** The organization must be established as a legally recognized entity in the US and registered to do business as a corporate entity in N.C.</i>	Procedure Manual					Procedure Manual				
d	<i>**Adult Day Health Services must have a certification by the NC Division of Aging and Adult Services</i>	Valid Certification by the NC Division of Aging					Valid Certification by the NC Division of Aging				

	Staffing Requirements										
a	Staff in this setting must meet general and certification requirements only.	Program description; Personnel Manual; job descriptions.					Personnel files; supervision plans or other documentation that staff minimum requirements and supervision requirements are met based on certification through NC Division of Aging and Adult Services.				
	Service Type/Setting										
	Services are provided in a certified adult day health care facility.	Valid Certification by the NC Division of Aging					Valid Certification by the NC Division of Aging				
	Program/Clinical Requirements										
a	Services are provided to adults who need a structured day program of activities and services with nursing supervision.	Program description; policies and procedures; personnel manual ; job description.					Program description; policies and procedures; personnel manual; job description; appropriate service notes documenting implementation of appropriate programming; copy of approved Plan of Care				
b	Service supports an adults independence, and promoting social, physical and emotional well being.	Program description; policies and procedures.					Program description; policies and procedures; appropriate service notes documenting implementation of appropriate programming;				

							approved Plan of Care.				
c	Program must include health services and a variety of program activities designed to meet the individual's need and interests.	Program description; policies and procedures.					Program description; policies and procedures; appropriate service notes documenting implementation of appropriate programming; approved Plan of Care.				
d	Cost of transportation is not included in the rate paid to providers of adult day health.	Program description; policies and procedures.					Program description; policies and procedures; appropriate service notes documenting implementation of appropriate programming; approved Plan of Care.				
Documentation Requirements											
a	Must meet requirements for documentation through the Division of Aging. (See Division of Aging website at www.dhhs.state.nc.us/aging .)	Requirements for documentation through the Division of Aging.					Evidence of documentation according to Division of Aging requirements.				